POSITION	INITIAL	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	10-2-01
FORMALITY REVIEW	kee	705	10/18/0
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim	Date	Claim	Date	Claim	Date
Final / Original		Final / Original		Final / Original	
1	16/03	51		101	
2		52		102	
3		53		103	
4		54		104	
5		55		105	
6		56		106	
7		57		107	
8		58		108	
9		59		109	
10		60		110	
11		61		111	
12		62		112	
13		63		113	
14		64		114	
15		65		115	
16		66		116	
17		67		117	
18		68		118	
19		69		119	
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23		73		123	
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25		75		125	
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37		87		137	
38		88		138	
39		89		139	
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41		91		141	
42		92		142	
43		93		143	
44		94		144	
45		95		145	
46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	

453
10-19-01

If more than 150 claims or 10 actions
staple additional sheet here

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